FORM D

PROCESSED NOV 1 9 2007 UNITED STATES
SEÇURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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•	OMB APP	OMB APPROVAL					
SION	OMB Number:	3235-0076					
	Expires: Apri	1 30,2008					
	Estimated average	ne burden					

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SEC USE ONLY					
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DATE RECEIVED					
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hours per response. 16.00

A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer ame of Issuer (check if this is an amendment and name has changed, and indicate change.) Capitan Precious Metals, Inc. Idress of Executive Offices (Number and Street, City, State, Zip Code)	D OLOE	ZONZ ZONZ
Enter the information requested about the issuer one of Issuer (Fel VE	7007
Capitan Precious Metals, Inc. Capitan Precious Metals, Inc. (Number and Street, City, State, Zip Code)	The Vie	•
Capitan Precious Metals, Inc. Idress of Executive Offices (Number and Street, City, State, Zip Code)	10/18	
Idress of Executive Offices (Number and Street, City, State, Zip Code)	1 1/~	3 SECTION
	Telephone Number (Inclu	iding Area Code)
325 Airmotive Way, Suite 276, Reno, NV 89502	75-786-6444	
Idress of Principal Business Operations (Number and Street, City, State, Zip Code) different from Executive Offices)	Telephone Number (Incl	uding Area Code)
ief Description of Business		
the Company is an exploration stage company that owns interests in several mines for the extention ores and other minerals.	oploration, development	and mining of pre
business trust limited partnership, to be formed	asc specify	
Month Year ctual or Estimated Date of Incorporation or Organization: 1 2 0 U Actual Estima risdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	<u></u>	7083535
ENERAL INSTRUCTIONS		
deral: the Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or $d(6)$.		-
then To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A deschange Commission (SEC) on the earlier of the date it is received by the SEC at the address given belonich it is due, on the date it was mailed by United States registered or certified mail to that address.		
here To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 2054	19.	
opies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually stocopies of the manually signed copy or bear typed or printed signatures.	signed. Any copies not ma	nually signed must b
formation Required: A new filing must contain all information requested. Amendments need only report ereto, the information requested in Part C, and any material changes from the information previously supplied to be filed with the SEC.		
ling Fee; There is no federal filing fee.		
ate: his notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sale LOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Sec to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for t company this form. This notice shall be filed in the appropriate states in accordance with state law. T is notice and must be completed.	curities Administrator in e the exemption, a fee in the	ach state where sale proper amount sha
ATTENTION		<u> </u>
A I LITTOR	mption. Conversely, f	

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Pavlich, Kenneth P. Business or Residence Address (Number and Street, City, State, Zip Code) 1325 Airmotive Way, Suite 276, Reno, NV 89502 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Wilson, R. William Business or Residence Address (Number and Street, City, State, Zip Code) 1325 Airmotive Way, Suite 276, Reno, NV 89502 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Snyder, Bruce F. Business or Residence Address (Number and Street, City, State, Zip Code) 1325 Airmotive Way, Suite 276, Reno, NV 89502 General and/or Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Z Director Managing Partner Full Name (Last name first, if individual) Kaiser, Marvin K. Business or Residence Address (Number and Street, City, State, Zip Code) 1325 Airmotive Way, Suite 276, Reno, NV 89502 ☐ Beneficial Owner ☐ Executive Officer Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Gentry, Donald W. Business or Residence Address (Number and Street, City, State, Zip Code) 1325 Airmotive Way, Suite 276, Reno, NV 89502 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Director Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

	B. INFORMATION ABOUT OFFERING												
1	1. He the inverseld or doze the insure intend to call to non-negredited investors in this offering?									Yes [No IX ì		
1.	 Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE. 									Ľ	į.		
2.									\$_0.0	0			
										Yes	No		
3.													
4,	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful N o	•	Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	lumber and	Street, C	ity, State, Z	ip Code)						
Nai	me of Ass	sociated Br	oker or De	aler			<u> </u>						
Sta	tes in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit I	Purchasers						
	(Check	"All States	" or check	individual	States)		,					Al:	States
	AL	AK	ΑŻ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
	KI		(30)			[01]		(YA)	(WA)				
Ful	l Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (Number an	d Street, C	City, State, 2	Zip Code)	<u> </u>	• •				· · · · · · · · · · · · · · · · · · ·
<u></u>	C A	id D	oker or De	-1									
Nai	me of As:	sociated Bi	oker or De	aier									
Sta						to Solicit					7		
	(Check	"All States	" or check	individual	States)			***************************************				□ VI	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GĄ	HI	ĪD
		IN N	IA NW	KS.	KY	LA)	ME	[MD]	MA]	MI	MN	MS	MO PA
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PR
Ful	Full Name (Last name first, if individual)												
Bu	siness or	Residence	Address (Number an	d Street. C	City, State, 2	Zip Code)	 .	<u> </u>		···		
	Business or Residence Address (Number and Street, City, State, Zip Code)												
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)								☐ Al	l States				
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL IN IA KS KY LA ME MD MA MI MN MT NE NV NH NJ NM NY NC ND OH OK									MN OK	MS OR	MO PA	
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	<u> </u>	\$
	Equity	1,000,000.00	\$_100,000.00
	Convertible Securities (including warrants)	S	\$
	Partnership Interests	<u> </u>	\$
	Other (Specify)	5	\$
	Total	1,000,000.00	<u>\$ 100,000.00</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		4
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited investors		<u>\$ 100,000.00</u>
	Non-accredited Investors		s
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$ <u>0.00</u>
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$500.00
	Printing and Engraving Costs		\$
	Legal Fees		\$_5,000.00
	Accounting Fees	_	\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify)		\$
	Total		\$ 5,500.00

C. OFFERING PE	RICE, NUMBER OF INVESTORS, EXPENSES AND USE O	F PROCEEDS		
and total expenses furnished in response	gregate offering price given in response to Part C — Question to Part C — Question 4.a. This difference is the "adjusted gro	oss	\$	
each of the purposes shown. If the am	ted gross proceed to the issuer used or proposed to be used to nount for any purpose is not known, furnish an estimate a The total of the payments listed must equal the adjusted groonse to Part C — Question 4.b above.	nd		
		Payments to Officers, Directors, & Affiliates	Payments to Others	
Salaries and fees		🔲 \$	_ D\$	
Purchase of real estate		🗌 💲	_	
Purchase, rental or leasing and installa and equipment	ation of machinery	🔲 \$	\$	
	ings and facilities			
offering that may be used in exchange	ding the value of securities involved in this for the assets or securities of another	[\$	_	
		_		
		- 	_ []\$	
Column Totals		s 0.00	 y \$ 994,500.00	
Total Payments Listed (column totals	-		994,500.00	
	D. FEDERAL SIGNATURE			
signature constitutes an undertaking by the	rigned by the undersigned duly authorized person. If this no issuer to furnish to the U.S. Securities and Exchange Commany non-accredited investor pursuant to paragraph (b)(2) of	mission, upon writ		
Issuer (Print or Type)	Signature	Date		
El Capitan Precious Metals, Inc.	Laure	November 8, 2	2007	
Name of Signer (Print or Type)	Title of Signer (Print or Type)			
R. William Wilson	Chief Financial Officer			

ATTENTION —

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

